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APPLICANTS

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** CONTINUING DATA *****

This application is a CON of PCT/US02/18623 06/10/2002
 (*)Data provided by applicant is not consistent with PTO records.

OK CCS

** FOREIGN APPLICATIONS *****

None CCS

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 03/09/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance	MN	11	30	3

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TITLE

Bone plates

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees.(Processing Ext. of time)
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